Report to Congressional Committees

July 2015

ARMY RESERVE COMPONENTS

Improvements Needed to Data Quality and Management Procedures to Better Report Soldier Availability

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ARMY RESERVE COMPONENTS

Improvements Needed to Data Quality and Management Procedures to Better Report Soldier Availability

Why GAO Did This Study

The sustained readiness and availability of the Army's reserve component forces (the Army Reserve and the Army National Guard) is critical to U.S. national defense. These soldiers comprise over half of the Army's total force and their availability is key, as the Army plans to reduce its number of soldiers over the next several years.

The House Report accompanying the Fiscal Year 2015 National Defense Authorization Act included a provision for GAO to review issues related to the non-availability of soldiers in the Army reserve components. In this report GAO examined, among other things, the extent to which the Army reserve components (1) have complete, accurate, and timely soldier information to report soldiers' non-availability rates and (2) verify in a timely manner whether soldiers' injuries and illnesses are service-connected, as delays can affect soldier non-availability.

GAO reviewed Army regulations and analyzed soldier non-availability data for fiscal years 2012-14; however, due to concerns with data reliability, GAO focused its analysis on January 2015.

What GAO Recommends

GAO recommends that the Army reserve components increase the scope and frequency of data quality reviews; improve data system updates of availability-related information; reduce the backlog of investigations of service-connected injuries and illnesses; and issue revised guidance that addresses causes for the delays. In written comments, DOD agreed with the recommendations and provided additional comments for context.

View GAO-15-626. For more information, contact Brenda S. Farrell at (202) 512-3604 or farrellb@gao.gov

What GAO Found

The Army reserve components do not have complete, accurate, and timely information to report soldiers' non-availability rates. In January 2015, the Army Reserve and the Army National Guard reported overall non-availability rates of 22 and 21 percent, respectively. However, GAO analyzed a limited number of medical, training, and administrative availability-related variables for all 85,000 soldiers in six units during this time period and identified more than 3,800 examples of soldiers' records that were inaccurate, incomplete, or inconsistent. For example, GAO identified soldiers who were listed as available but were incarcerated or had a medically limiting condition. A comprehensive analysis could reveal additional inaccuracies. While the Army reserve component commands and some units perform some data quality reviews to identify and correct discrepancies within the multiple data systems that they rely on for availability data, these reviews examine a limited scope of availability-related variables and are performed infrequently. For example, one system generates a report that identifies a small number of problematic variables, but only reports this information quarterly. Further, it does not provide information specific enough to correct individual problems or cover the full range of variables contributing to inaccurate data. Furthermore, the multiple systems do not interface with each other in a way to allow for timely updates of inconsistent availability information. Without an increase in the scope and frequency of data quality reviews, and improvements to systems to update information in a timely manner, the Army reserve components' availability data will continue to be inaccurate.

The Army reserve components do not verify in a timely manner whether soldiers' injuries or illnesses are service-connected (i.e., occurred in the line of duty) which could lengthen the time that some soldiers are classified as non-available. In January 2015, 81 percent of Army Reserve and 74 percent of the Army National Guard investigations of soldiers' injuries and illnesses were overdue per Army regulation. However, the Army does not have a plan to reduce the existing backlog which officials said is caused in part by soldiers not complying with information requests during investigations. The Army is updating its program guidance to address some of the causes cited for these delays, but as of June 2015, officials stated that the revised regulation had not been issued and did not address soldier noncompliance.

Figure: Army Reserve Components' Backlog of Investigations as of January 2015

Army Reserve
- 19% Not overdue
- 81% Overdue Line of Duty Investigations

Army National Guard
- 26% Not overdue
- 74% Overdue Line of Duty Investigations

Source: GAO analysis of Army Reserve and Army National Guard data. | GAO-15-626

Note: Overdue means the investigation has been in process longer than the standard processing time as prescribed by Army Regulation 600-8-4.

United States Government Accountability Office

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Abbreviations

ATRRS	Army Training Requirements and Resources System
DNA	Deoxyribonucleic Acid
DOD	Department of Defense
DQI	Data Quality Index
HIV	Human Immunodeficiency Virus
MEDPROS	Medical Protection System
RCMS	Reserve Component Manpower System
SIDPERS	Standard Installation/Division Personnel System
TAPDB-R	Total Army Personnel Data Base-Reserve
VA	Veterans Administration

July 31, 2015

The Honorable John McCain
Chairman
The Honorable Jack Reed
Ranking Member
Committee on Armed Services
United States Senate

The Honorable Mac Thornberry
Chairman
The Honorable Adam Smith
Ranking Member
Committee on Armed Services
House of Representatives

As an integral part of the Army, its reserve components (the Army Reserve and the Army National Guard) are called upon to meet a full spectrum of defense requirements including those related to homeland security, civil support, domestic disaster requirements, and operations around the globe. The availability[1] and readiness[2] of the Army's reserve components for mobilization[3] is critical as together these components make up over 50 percent of the Army's total force. By meeting a combination of specific medical, training, and administrative requirements, soldiers are available to support their unit's mission. As the

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[1] The terms "availability/available" indicate that required assets (i.e., personnel, equipment, and subordinate elements) currently are controlled or possessed by a unit or, when applicable, are accessible within 72 hours for mission accomplishment.

[2] Unit "readiness" is defined as the ability to provide capabilities required by the combatant commander to execute assigned missions and is derived from the ability of each unit to conduct the missions for which it was designed.

[3] "Mobilization" is a complex process used to move the military from its peacetime posture to a heightened state of readiness to support national security objectives in a time of war or other national emergency.

Army reduces its number of soldiers over the next several years[4] managing their availability will be especially important as those who are non-available for mobilization impact their unit's ability to perform its required tasks and require unit level commanders to find other individuals to fill vacancies left by these non-available soldiers from a smaller population of the remaining available soldiers.

In June 2011, we reported that the Army needed to implement actions to improve data consistency as units were reporting their personnel numbers differently from what was called for in guidance.[5] Further, we reported that Army quality assurance reviews had not identified all inconsistencies, and system mechanisms were not preventing the submission of inconsistent data. As a result, we concluded that until internal controls improve, decision makers will continue to rely on readiness information that is based on inconsistent reporting. Therefore, we recommended that the Army provide additional internal controls such as increasing quality assurance reviews or putting system technical checks in place to prevent the submission of data that does not comply with service reporting requirements. However, the Department of Defense (DOD) disagreed with this recommendation stating that it believed its internal controls to be sufficient.

The House Report 113-446 accompanying a proposed bill for the National Defense Authorization Act for Fiscal Year 2015 includes a provision for us to review issues related to the non-availability of soldiers in the Army Reserve and the Army National. This report addresses the extent to which the Army reserve components (1) have complete, accurate, and timely information to report soldiers' non-availability rates and (2) verify, in a timely manner, whether soldiers' injuries and illnesses are service-connected, as delays could affect soldier non-availability. In addition, we provide a description of how the Army reserve components accounted for new soldiers who are not available because they have not completed

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[4] The Army will decrease its fiscal year 2015 end strength of 490,000 active duty soldiers to 475,000 and its Army National Guard and Army Reserve soldiers from 552,200 to 540,000 by the end of fiscal year 2016. This represents a slowdown of the drawdown of previously planned reductions. However, the Army still plans to achieve its target end strength of 450,000 active duty soldiers by the end of fiscal year 2018 and 530,000 total soldiers for the Army National Guard and Army Reserve by the end of fiscal year 2017.

[5] GAO, *Military Readiness: Army and Marine Corps Reporting Provides Additional Data, but Actions Needed to Improve Consistency,* GAO-11-526 (Washington, D.C.: June 2011).

initial military training. In April 2015, we submitted our preliminary observations in a briefing your Committees.

For our first objective, we obtained solider identification information and medical-, training- and administrative-related data for the Army Reserve and the Army National Guard for fiscal years 2010 through 2014. We identified inconsistencies in the way the medical availability data were reported around the June to July 2012 timeframe, which we determined had resulted from a change in how soldiers with certain medically limiting conditions were being accounted for.[6] As a result, we analyzed data from the time period after the policy change, July 2012 through the end of fiscal year 2014, in order to have consistent data over the entire time frame for our review. However, due to the magnitude of discrepancies that we found using these data, we decided we could more comprehensively analyze these discrepancies with a snapshot of the most current data available (January 2015), from a non-generalizable sample of a combination of six units— two Army Reserve commands and four Army National Guard states—based on individual soldier availability data. We obtained the soldier availability data for the soldiers in this sample of six units from five data systems that the Army uses to obtain soldier availability information. We determined that the information we analyzed, though not representative of all units, was sufficient to provide relevant insights for our review.

We selected four Army National Guard states based on a combination of factors such as the number of assigned soldiers in the state or territory, geographic dispersion, and high or low rates of overall medical- or training-related soldier non-availability. In addition, we selected two Army Reserve commands based on proximity to and geographic dispersion with the four Army National Guard states in order to allow for regional perspectives between organizations. We selected two large and two medium-sized National Guard states (California, Georgia, Michigan, and Utah) and the largest and one medium-sized Army Reserve command (the 377th Theater Sustainment Command and the 807th Medical Support Command). We compared these solider availability data from these five data systems for the six selected locations with (1) *Standards*

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[6] National Guard Bureau officials informed us that in July 2012 the Army reserve components collectively made a rule change, effectively changing the status of soldiers with short-term medically limiting conditions from "available" to "non-available" for mobilization.

for *Internal Control in the Federal Government*[7] and (2) Army guidance documents for reporting the availability of soldiers, and assessed the soldier availability information for completeness, accuracy, and timeliness. Specifically, the *Standards for Internal Control in the Federal Government* define "timeliness" as information that is promptly recorded to maintain its relevance and value to management in making decisions such as reporting soldier non-availability rates. We assessed the reliability of the data elements in the multiple data systems needed for this engagement and identified reliability issues that we will discuss later in this report.

For our second objective, we obtained and reviewed the Line of Duty program regulation,[8] which details the policies and procedures for investigating the circumstances of a soldier's disease, injury, or death. The Deputy Chief of Staff of the Army for Personnel (G-1) is the proponent and exception authority that includes the investigation procedures and the processing time standards for these investigations. Further, we obtained summary information from the Army Reserve and the Army National Guard from January 2015 that showed (1) the total number of investigations that were in process at that time for the entire Army Reserve by support command level and the Army National Guard by state or territory and (2) the breakdown of the total as to the number that were on-time and overdue as compared with the Line of Duty program regulation's processing time standards. We discussed the Line of Duty investigation process and the challenges that exist with the implementation of this program with officials from the U.S. Army Reserve Command, the National Guard Bureau, the California National Guard, the Georgia National Guard, the Utah National Guard, the 377th Theater Sustainment Command, and the 807th Medical Support Command. Further, we interviewed officials from the Office of the Surgeon General-Army, the Army Human Resources Command, and the Headquarters, Department of the Army to determine the status of the review of the Line of Duty program and any updates to its governing regulation.

For our third objective, we identified relevant active and reserve component regulations, laws and policies describing the initial military

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[7] GAO/AIMD-00-21.3.1.

[8] Department of the Army, Army Regulation 600-8-4, *Line of Duty Policy, Procedures, and Investigations*, September 4, 2008.

training[9] requirements for new soldiers to be considered available for mobilization and subsequent deployment and the timelines for completing the training. We also analyzed Army Reserve and Army National Guard summary reports as well as data for individual soldiers from the six units we selected for the most recent point in time that data were available (January 2015) showing the number of soldiers that were not available because they had not completed their initial military training. To identify the extent to which delays exist in the process of soldiers completing their initial military training, we also requested information from the U.S. Army Recruiting Command, the U.S. Army Reserve Command, and the National Guard Bureau for January 2015 showing the number of soldiers who were delayed in completing their initial military training. Additionally, to determine how the Active Army, the Army Reserve and the Army National Guard account for their soldiers who are in training or otherwise in a non-available status, we researched applicable laws or regulations governing the assignment of soldiers to units or to a separate personnel account. We interviewed U.S. Army Reserve Command, Army National Guard, and unit officials to discuss the advantages and disadvantages of using the different assignment approaches. In order to better understand how initial military training policies and procedures were being applied to individuals processing through the training, we interviewed officials from the U.S. Army Recruiting Command, National Guard Bureau, U.S. Army Reserve Command, and the U.S. Army Training and Doctrine Command. We also interviewed both Army Reserve and Army National Guard command and unit leaders at our selected locations to identify the management challenges, as well as the effect that soldiers who were not available because they had not completed initial military training had on those locations.

We conducted this performance audit from July 2014 to July 2015 in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives. A more detailed discussion of our scope and methodology can be found in appendix I.

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[9] Initial training includes a basic officer leadership course or warrant officer basic course, as well as basic combat training and advanced individual training for enlisted soldiers to qualify for a military occupational specialty.

Background

Determining that Army reserve component soldiers are available to mobilize involves the oversight and management by officials from multiple DOD entities, the application of criteria regarding the soldiers' medical-, training-, and administrative-related availability status, and the recording of this information throughout multiple data systems.

DOD Entities with Oversight and Management Responsibilities Related to Army Reserve Component Soldiers' Availability Status

Overall, the Assistant Secretary of Defense for Reserve Affairs is to advise the Secretary of Defense on reserve component matters and oversee all reserve component-related matters. Further, the Secretary of the Army is responsible for, and has the authority necessary to conduct, all affairs of the Department of the Army. These responsibilities include, among other things, organizing, training, and mobilizing forces within two distinct components: the active component and the reserve components—the U.S. Army Reserve and the Army National Guard. Within the Department of the Army, the Assistant Secretary of the Army for Manpower and Reserve Affairs is to develop, oversee, and review policies and programs pertaining to the mobilization, demobilization, and availability of the reserve components.

The Chief of the Army Reserve is to advise the Secretary of the Army and the Chief of Staff of the Army on all issues related to the U.S. Army Reserve Command, which provides trained, equipped, and ready soldiers, leaders, and units to support the combatant commands.[10] Further, as the other reserve component of the Army, the Army National Guard provides trained and equipped units ready to (1) defend property and life to the 54 states and territories of the United States and (2) respond to overseas combat missions, counterdrug efforts, reconstruction missions, and more, as needed. The Chief of the National Guard Bureau is responsible for creating and implementing policy and guidance so that Army National Guard soldiers meet overall Department of the Army standards. The Chief of the National Guard Bureau is also responsible for ensuring that Army National Guard soldiers are accessible, capable, and ready to protect the homeland and to provide combat resources to the Army.

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[10] The Department of Defense has six geographical and three functional commands that share in executing its missions and responsibilities.

The Army Training and Doctrine Command develops, educates, and trains soldiers; supports unit training; and designs, builds, and integrates a mix of capabilities, formations, and equipment in support of Army soldier and unit training. Additionally, the Director of the Defense Health Agency is responsible for managing an Individual Medical Readiness Working Group to monitor, revise, evaluate, and validate data results in conjunction with the services and to recommend individual soldier medical readiness goals.

Criteria for Determining Army Reserve Component Soldiers' Availability Status

According to Army guidance, unit commanders are to consider soldiers available if they meet a combination of medical, training, and administrative criteria.[11] The following are the six individual medical readiness requirements:[12]

- annual completion of a periodic health assessment;
- annual completion of a dental assessment;
- current on required immunizations;
- current on required medical laboratory studies such as an HIV test and a DNA sample;
- possession of individual medical equipment items; and,
- free of any deployment-limiting medical or dental conditions that may interfere with the soldier's ability to perform duties while deployed.

The following categories are used to define a soldier's medical availability status depending on how many of the six individual medical readiness requirements are completed:

- "Fully Medically Ready" if the soldier is current on all six individual medical requirements;
- "Partially Medically Ready" if the soldier is lacking one or more of the individual medical requirements that could be resolved within 72 hours;
- "Not Medically Ready" if the soldier possesses a chronic or prolonged deployment- limiting medical or mental condition; or

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[11] Department of the Army, Pamphlet 220-1, *Defense Readiness Reporting System-Army Procedures*, (Nov. 16, 2011).

[12] Department of Defense Instruction 6025.19 *Individual Medical Readiness*, (June 9, 2014).

- "Medically Indeterminate" if the soldier is missing health information— a status used only until the soldier has completed the required medical and dental examinations.

To determine a soldier's training-related availability status, a unit commander must determine whether the soldier has completed (1) a basic officer leadership course, a warrant officer basic course, or initial entry training requirements,[13] as applicable and also (2) the required training for an assigned duty position. Under law,[14] soldiers in the Army Selected Reserve have up to 2 years to complete these initial training requirements and until they do, they are not considered available to mobilize.

Finally, other situations may arise that could lead to a soldier being classified as non-available regardless of the soldier's medical or training availability status. For example, a soldier is considered "administratively non-available"[15] if he or she is

- without a family care plan that indicates who will take care of his or her dependents in the case of deployment;
- under arrest or held in confinement because of legal issues;
- convicted of a Lautenberg (criminal domestic violence) violation, which makes the soldier non-available for missions requiring the use of firearms:
- less than 18 years of age;
- mobilized or deployed;
- a conscientious objector;
- or in the process of retiring or being released from active duty.

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[13] Initial entry training requirements are specified for enlisted personnel and include basic combat training and advanced individual training.

[14] Army National Guard Combat Readiness Reform Act of 1992, Pub. L. No, 102-484, Title XI, as amended. See 10 U.S.C. § 10105 note.

[15] Department of the Army Pamphlet 220-1, *Defense Readiness Reporting System-Army Procedures*, (Nov. 16, 2011).

Line of Duty Investigations of Soldier Injuries and Illnesses Are Part of a Process to Manage Medically Non-Available Soldiers

Line of Duty investigations are part of the Army reserve components' process to manage their soldiers whose service has been interrupted by injury, illness, disease, or death. Soldiers who are not medically ready with medical conditions that will require longer than 72 hours to resolve are to be reported as not available to their units according to Army regulation.[16] Army Reserve and Army National Guard soldiers are entitled to hospital benefits, pensions, and other compensation for injury, illness, or disease incurred in the line of duty unless their condition was caused by their intentional misconduct or willful negligence. Line of duty investigations are conducted in order to determine whether the soldier was at fault at the time of an injury or death. Possession of one or more medical conditions or physical defects does not mean automatic retirement or separation from the service because many medical conditions are temporary such as broken bones, recovery from surgery, or pregnancy. However, once a medical treatment provider determines that a soldier has a condition that does not appear to meet medical retention standards,[17] the soldier is to be referred to a Medical Evaluation Board Physical Evaluation Board as part of DOD and the Department of Veterans Affairs Integrated Disability Evaluation System.[18] The board considers numerous pieces of information in assessing the soldier for continued service, and one of these pieces of required information is a Line of Duty investigation. In order for these soldiers to again be considered medically ready, and thus available to their units, they must complete the board's process and be deemed to meet medical retention standards and be fit for duty. Alternatively, the non-available soldier could be discharged from the service.

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[16] Department of the Army, Army Regulation 220-1: *Army Unit Status Reporting and Force Registration-Consolidated Policies,* (Apr. 15, 2010).

[17] Department of the Army, Army Regulation 40-501: *Medical Services: Standards for Medical Fitness*, (Aug. 4, 2011).

[18] The Integrated Disability Evaluation System is a joint disability evaluation system created to eliminate duplication between the Department of Defense and the Department of Veterans Affairs separate disability systems and to expedite receipt of Department of Veterans Affairs' benefits for wounded, ill, and injured servicemembers.

Systems for Recording Information Used to Determine Army Reserve Component Soldiers' Availability Status

The Army Reserve and the Army National Guard use more than a dozen data systems to record or analyze various pieces of data related to the individual information and medical, training, and administrative status of their soldiers. The Army Reserve and Army National Guard provided individual soldier availability data, listed in Table 1, from the five main data systems they use to track soldier availability-related data.

Table 1: Main Data Systems Used to Track Army Reserve Component Soldiers' Availability

Data system	Description	Utilized by	Type of availability data
The Medical Protection System (MEDPROS)	The data system that tracks immunization and medical readiness information for all active and reserve components as well as other pieces of information affecting soldiers' medical availability to deploy.	All Army	Medical
Army Training Requirements and Resources System (ATRRS)	The management information system of record for managing soldier training information.	All Army	Training
Total Army Personnel Data Base-Reserve (TAPDB-R)	The data system of record for personnel data to fully support all human resource functions during peacetime and while deployed.	Army Reserve	Medical, training, administrative, other
Standard Installation/Division Personnel System (SIDPERS)	The data system of record for all personnel information for Army National Guard soldiers.	Army National Guard	Training, administrative, other
Reserve Component Manpower System (RCMS)	The data warehouse that provides decision makers with standard reports for analyzing personnel and operational readiness data by aggregating sources of information from many disparate systems.	Army Reserve and Army National Guard	Medical, training, administrative, other

Source: GAO analysis of DOD data. |GAO-15-626|

Note: Army reserve component officials agree that while this is not an exhaustive list, these are the primary systems used to track soldier availability for mobilization as reported up the chain of command.

The Army Reserve Components Do Not Have Complete, Accurate, and Timely Data to Support Reported Soldier Non-Availability Rates

We found that the Army reserve components do not have complete, accurate, and timely data to support the non-availability rates that they report to their higher commands. In January 2015, the Army Reserve and Army National Guard reported overall non-availability rates of 22 percent and 21 percent, respectively. Initially, we obtained and analyzed nationwide soldier non-availability related data from July 2012 through fiscal year 2014 from both the Army Reserve and the Army National Guard in order to conduct a trend analysis of the data. However, due to the magnitude of discrepancies that we found using these historical data, we then requested and obtained data from a non-generalizable sample of six specific units (two Army Reserve commands and four Army National Guard states) for the most recent month available, January 2015, to

analyze these discrepancies. The six units provided data on the 85,000 soldiers assigned to these units during this time frame –about 66,000 soldiers listed as available, and 19,000 soldiers listed as non-available. We analyzed a limited number of medical, training, and administrative availability-related variables from five Army reserve component data systems[19] for this sample and found one-third to one-half of the 19,000 soldiers listed as non-available in this sample were non-available due to medical reasons; about one-third were non-available due to training reasons; and about one-quarter were non-available due to other or multiple reasons. Overall, we found that the availability data for more than 3,800 soldiers of the 85,000 soldiers assigned to these units were incomplete, inaccurate, or inconsistent, thus making the data used to report these rates not sufficiently reliable. Because we only analyzed a selection of medical-, training-, and administrative-related availability data, a more comprehensive analysis of the universe of availability-related variables could reveal additional examples of incorrect availability statuses— meaning that the overall non-availability rates reported by the Army Reserve and Army National Guard could be different than the percentages stated above.

Of the 66,000 soldiers in our sample reported by the Army Reserve and the Army National Guard as available for mobilization in January 2015, we identified more than 750 soldiers who were inaccurately reported as available—that is, they had conditions that according to Army guidance would mean they were non-available.[20] For example:

- More than 600 soldiers were listed as available but were currently mobilized or deployed;
- About 100 soldiers were listed as available but were less than 18 years of age;
- About 30 soldiers listed as available had medically limiting conditions.
- More than a dozen soldiers were listed as available but were missing health information for more than 5 years; and
- About 10 soldiers were listed as available but were currently incarcerated.

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[19] Medical Protection System, Army Training Requirements and Resources System, Standard Installation/Division Personnel System, Total Army Personnel Data Base-Reserve, and Reserve Component Manpower System

[20] Department of the Army, Pamphlet 220-1, *Defense Readiness Reporting System-Army Procedures*, (Nov. 16, 2011).

In addition, we also found about 350 cases of soldiers with what unit officials considered to be questionable or incomplete statuses. For example, about 280 individuals had not been present at drill for at least the last 6 months but were listed as available and about 90 individuals had been listed as non-available with a short-term medically limiting code (medically ready within 30 days) for longer than 2 years. Table 2 summarizes the categories and attributes of the incomplete, inaccurate, or inconsistent data that we identified for the sample of six units as of January 2015.

Table 2: Categories and Attributes of the Incomplete, Inaccurate, or Inconsistent Data That We Identified in Army-Provided Availability Data for the Sample of Six Units(January 2015)

Attributes

Category	Includes self-reported information	Soldier status conflicts with Army guidance[a]	Soldier status is questionable but not against guidance[b]	Inconsistent data between systems
Available but currently mobilized or deployed		✓		✓
Available but less than 18 years of age	✓	✓		✓
Available but currently incarcerated	✓	✓		✓
Available but has medically Limiting condition	✓	✓		✓
Available but is long-term non- participant at drill			✓	
Missing health information for more than 5 years	✓	✓		
Conflicting medical status	✓		✓	✓
Physical limitations *without* medically limited status listed			✓	✓

Source: GAO analysis of Army Reserve and Army National Guard data. | GAO-15-626

[a]Department of the Army, Pamphlet 220-1, Defense Readiness Reporting System-Army Procedures, (Nov. 16, 2011).

[b]Army reserve component officials stated that while these examples were questionable as to why the soldier was listed as available with such statuses, the status itself did not preclude availability, according to guidance.

Senior Army Reserve and Army National Guard unit officials agreed that the examples we identified showed instances of inaccurate information, represented situations that were questionable in nature, or highlighted records that were incomplete. Officials also noted that the data in the system are only as good as the information entered into the system and in many instances the information is incomplete or inaccurate due to soldier self-reporting or inaccuracies problems during data entry. Officials noted that the existing internal quality controls may not be adequate to completely identify and address these issues.

GAO-15-626 Army Reserve Components Non-Availability

As stated above, Army Reserve and Army National Guard officials identified soldiers' self- reported information as a cause of incomplete and inaccurate availability data within the multiple data systems. The Army National Guard provided the following specific examples of situations they have encountered in which self-reporting has directly led to incomplete or inaccurate data:

- Soldiers' family members might not be timely in reporting a non-military service related death.
- Soldiers may understate or not report chronic health conditions.
- Soldiers may not report that they have medical conditions for which they are receiving Department of Veterans Affairs' disability benefits. According to officials, because there is no connectivity between the Veterans Affairs and DOD systems, such information would not be identified other than through self-reporting by the soldier.
- Soldiers have to hand-carry their certificates of training and inform their units when they have completed their training because the training data system does not automatically connect to and update the personnel system with such information.

Of the 10,500 soldiers in our sample reported by the Army Reserve as non-available for mobilization, as of January 2015, we identified about 2,700 soldiers with inconsistent data between the five main data systems—- that is, the way the data systems currently interface does not allow for timely updates and reconciliation of conflicting data among all systems as a soldier's availability data changes in individual systems, putting the relevance of the availability data at risk. Specifically, soldiers listed with a long-term medically limiting condition in one data system were listed as having only a short-term disability, or no medical limitations, in other systems. We also found examples of data system inconsistencies to a lesser degree in the Army National Guard data, including soldiers who were identified as having physical limitations during their annual physical, but did not have a medically limiting status code listed in the Medical Protection System (referred to as MEDPROS). In addition, some of the examples of inaccurate data discussed above are also affected by untimely updates between data systems, some of which have lag times of weeks or months between updates, leading to inaccuracies. Even systems that update every 24 hours can negatively affect the accuracy and completeness of the data, depending on the timing of report creation and information input.

Furthermore, both Army Reserve and Army National Guard officials stated that commander discretion in the interpretation of soldier availability data at the unit level allows for operational flexibility but may

create inconsistent data among systems. For example, a commander may classify soldiers who are in the process of retraining to a different military occupational specialty or transitioning from an enlisted soldier to an officer or warrant officer as available in the Standard Installation/Division Personnel System (SIDPERS) or Total Army Personnel Data Base-Reserve (TAPDB-R) based on the soldiers' previous training or qualifications. However, the individual would still be listed as non-available due to training in Army Training Requirements and Resources System (ATRRS) because the data systems do not currently interface in a way to allow for timely updates of this new availability data to keep the soldier's information relevant. Because soldier availability information is always changing, without timely updates between data systems that occur as soon as new information is added, commanders and unit administrators responsible for managing soldiers are unable to ensure that the data remains relevant and valuable for reporting soldier non-availability rates.

The Standards for Internal Control in the Federal Government[21] states that complete and accurate information should be available on a timely basis to maintain its relevance and value to management, allow for effective monitoring of events, and effective decision-making to accomplish agency objectives. While the Army reserve component commands and the units we selected perform some data quality reviews to identify and correct discrepancies within the multiple data systems that they rely on for availability data, these reviews examine a limited scope of availability-related variables and are performed infrequently. For example, the Army Reserve and the Army National Guard stated that they use reports, such as the quarterly Data Quality Index (DQI) reports which are narrowly scoped reports, focusing on the top 25 problematic variables of more than 8,000 variables across each of the Army reserve components. Officials stated that the DQI is intended to identify missing, incomplete, or inconsistent availability data between systems but does not identify invalid values unless they contradict data in a different system, or keep track of past variables when the new list is issued each quarter. These top 25 problematic variables are not necessarily representative of data inconsistencies specific to a particular unit, thus the unit may assume its data for other variable are accurate and may not look for other issues within its data. As a result, the DQI may only be helpful to units that

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[21] GAO/AIMD-00-21.3.1.

identify issues similar to the top 25 problematic variables within their own data and units may be unaware of other issues. Unit administrators can create "on-demand" discrepancy reports to help address other issues resulting from self-reporting and data entry, but the administrators have to suspect a potential problem with the data (e.g., available statuses despite contradiction with the guidance or inaccuracies due to self-reporting) before they can run the corresponding, issue-specific "on-demand" reports to identify and resolve the issue. While National Guard officials stated the DQI was intended to validate soldier statuses against Army policy and guidance, we identified soldiers in the data who were listed as available despite having statuses in contradiction with the guidance concerning availability, bringing the effectiveness of these existing quality reviews into question.

Overall, the national and unit level data quality reviews do not check the full range of potential errors, missing or invalid values, and inconsistent data among all the data systems used to track soldier availability. The reports only focus on known potential issue areas and often once issues identified by these reports are addressed, they may not be considered in future reports, until it becomes such a systematic problem that it is once again identified in the DQI. Furthermore, these reports are conducted on an infrequent basis, with the DQI only being updated quarterly, and units running intermittent on-demand reports on a weekly or monthly basis, or as they have time to address suspicions of a potential issue. Thus, if data systems are updated with new information that is incomplete or incorrect, and a data quality review is not scheduled for another week or month, the data in these systems could be used to create inaccurate availability reports that hinder management's ability to make effective, well-informed decisions.

In addition, the multiple data systems (e.g., individual systems for recording medical, training, and administrative information) used to track availability data do not currently interface in a way to allow for timely updates between all systems to ensure the relevance and value of the data management uses to make soldier availability-related decisions. For example, the Army Reserve and the Army National Guard have access to the Reserve Component Manpower System (RCMS), a centralized data warehouse, which offers one point of access to all of the soldier availability data contained in the multiple data systems. But, while the RCMS warehouse has some algorithms in place to reconcile inconsistencies that exist between data systems, this reconciliation is only used for reports derived from warehouse data. Specifically, the warehouse does not update the availability data in the conflicting

individual data systems or automatically inform the units that there is a problem with their specific availability data. Once the issue is identified and addressed in one data system, at the unit level, the current interfaces between systems do not allow for timely updates to ensure relevant and valuable data is available in all other applicable data systems as soon as the change is made. Internal control standards state that controls should be installed at the interfaces between systems to ensure all inputs received are valid, all outputs are correct and properly distributed, and information is provided in a timely manner to maintain its relevance and value to decision makers.[22] Some of the data systems used by the Army Reserve and Army National Guard have lag times of weeks or months between updates and are not automated, leading to inconsistencies and inaccurate information. Even systems that update every 24 hours can negatively affect the accuracy and completeness of the data, depending on the timing of report creation and information input, hindering management's ability to make informed decisions.

We determined that, for the purpose of reporting soldier availability rates, the issues we identified within and between data systems used for tracking individual soldier availability render the data not sufficiently reliable. Because the Army Reserve and Army National Guard do not have constant oversight of their soldiers, they rely on self-reported information and cannot guarantee that soldiers are providing complete and accurate information. Without effective internal controls consisting of frequent data quality reviews that cover the full range of availability-related variables and timely updates between data systems, the Army reserve components will not be able to ensure that the data in and among systems is complete, accurate, and timely to efficiently and effectively manage individual soldier availability.

Both the Army and DOD are aware of the data issues resulting from the lack of integration of the Army's multiple data systems. For example, a September 2012 Army National Guard document on personnel data systems and data processing and metrics noted that data systems face systemic issues, accuracy issues, and delays in updating information, and had suggested the creation of the Data Quality Index to address the problem.[23] In addition, DOD tried to address the errors caused by the lack

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[22] GAO/AIMD-00-21.3.1

[23] The Army National Guard, *Personnel Readiness Study*, September 2012 and Enclosure 1.

of integration of personnel and pay systems that we previously reported in 1993,[24] through the implementation of the Defense Integrated Military Human Resources System. This system was intended to provide a joint, integrated, standardized personnel and pay system for all military personnel, but in February 2010, the project was canceled after 10 years of development due, in part, to a lack of strategic alignment, governance, and requirements management, as well as because of the overall magnitude of the project.

Subsequent to the cancelation of the Defense Integrated Military Human Resources System, the Army began designing the Integrated Personnel and Pay System-Army, which is intended to provide a 24-hour, web-based, integrated human resources system to soldiers, human resource professionals, combatant commanders, personnel and pay managers, and other authorized Army users. However, full deployment of the system is not expected until April 2020, and as we reported in February 2015, the Army had not developed any portion of the system as of November 2014.[25] Army National Guard officials have stated that if this system is ever fully implemented, they are concerned that it will be problematic for managing the availability statuses of their soldiers. Specifically, officials noted that unit administrators will have to learn an entirely new system with its own idiosyncrasies and also learn how this system interfaces with all the existing systems—effectively causing more problems than the lack of timely updates resulting from the current interface issues between data systems.

Both the Army Reserve and Army National Guard have governance boards tasked with providing the individual branches with recommendations to improve all data systems. However, officials did not inform us about whether the Army reserve components have conducted any research beyond these two integrated systems to identify ways to allow the multiple data systems to interface for timely updates between all systems to ensure relevant, valid, and reliable availability data. As the Army reduces its number of soldiers over the next few years, managing

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[24] GAO, *Financial Management: Defense's System for Army Military Payroll Is Unreliable,* GAO/AIMD-93-32 (Washington, D.C.: Sept. 30, 1993).

[25] GAO, *Defense Major Automated Information Systems: Cost and Schedule Commitments Need to Be Established*

Earlier, GAO-15-282 (Washington, D.C.: Feb. 26, 2015)

their availability based on complete, accurate, and timely data will be especially important as soldiers who are non-available impact their unit's ability to perform its required tasks and require commanders to fill vacancies from a smaller population of available soldiers.

The Army Reserve Components Do Not Verify in a Timely Manner Whether Soldiers' Injuries and Illnesses Are Service Connected, Which Could Lengthen Soldier Non-Availability

The Army Reserve and the Army National Guard do not verify whether not medically ready soldiers' injuries or illnesses are service-connected in accordance with Line of Duty investigation completion time lines prescribed by Army regulation,[26] which could lengthen the time which some soldiers are reported as non-available. In analyzing January 2015 soldier non-availability data, we found that over three-fourths of the Army Reserve and the Army National Guard's Line of Duty investigations were overdue, and that the Army Reserve and Army National Guard have not developed a plan for addressing the current backlog of investigations. Further, while the Army is updating the Line of Duty program regulation, the draft we reviewed does not fully address specific implementation challenges, including soldier non-compliance with reporting, which contribute to delays in processing soldiers' claims of having incurred service-connected injuries and illnesses.

A Majority of Both Army Reserve and Army National Guard Line of Duty Investigations Are Overdue and No Plan Exists to Specifically Address the Backlog

The Army Reserve and the Army National Guard report that their Line of Duty investigations are significantly behind schedule. Army Reserve and Army National Guard soldiers are entitled to hospital benefits, pensions, and other compensation for injury, illness, or disease incurred in the line of duty unless their condition was caused by their intentional misconduct or willful negligence. Line of Duty investigations are conducted to determine the circumstances of injury, illness, disease, or death of a soldier, and they are conducted essentially to make two determinations: (1) the duty status of a soldier at the time of an incident and (2) whether misconduct or negligence was involved in that incident and, if so, to what degree. According to the Line of Duty program regulation, Line of Duty investigations can be conducted (1) informally through the soldier's chain of command where no misconduct or negligence is indicated, has fewer required steps in the process, and should be completed within 40 days or (2) formally where an investigating officer is appointed to conduct an

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[26] Department of the Army, *Army Regulation 600-8-4: Line of Duty Policy, Procedures, and Investigations*, Sep. 4, 2008.

investigation into suspected misconduct or negligence, has more required steps to complete, and should be completed within 75 days after the soldier reports the incident. See figure 1 for an explanation of the processes and requirements of informal and formal Line of Duty investigations.

Figure 1: Informal and Formal Line of Duty Investigation Processes and Associated Requirements

Source: GAO analysis of Army regulation. | GAO-15-626
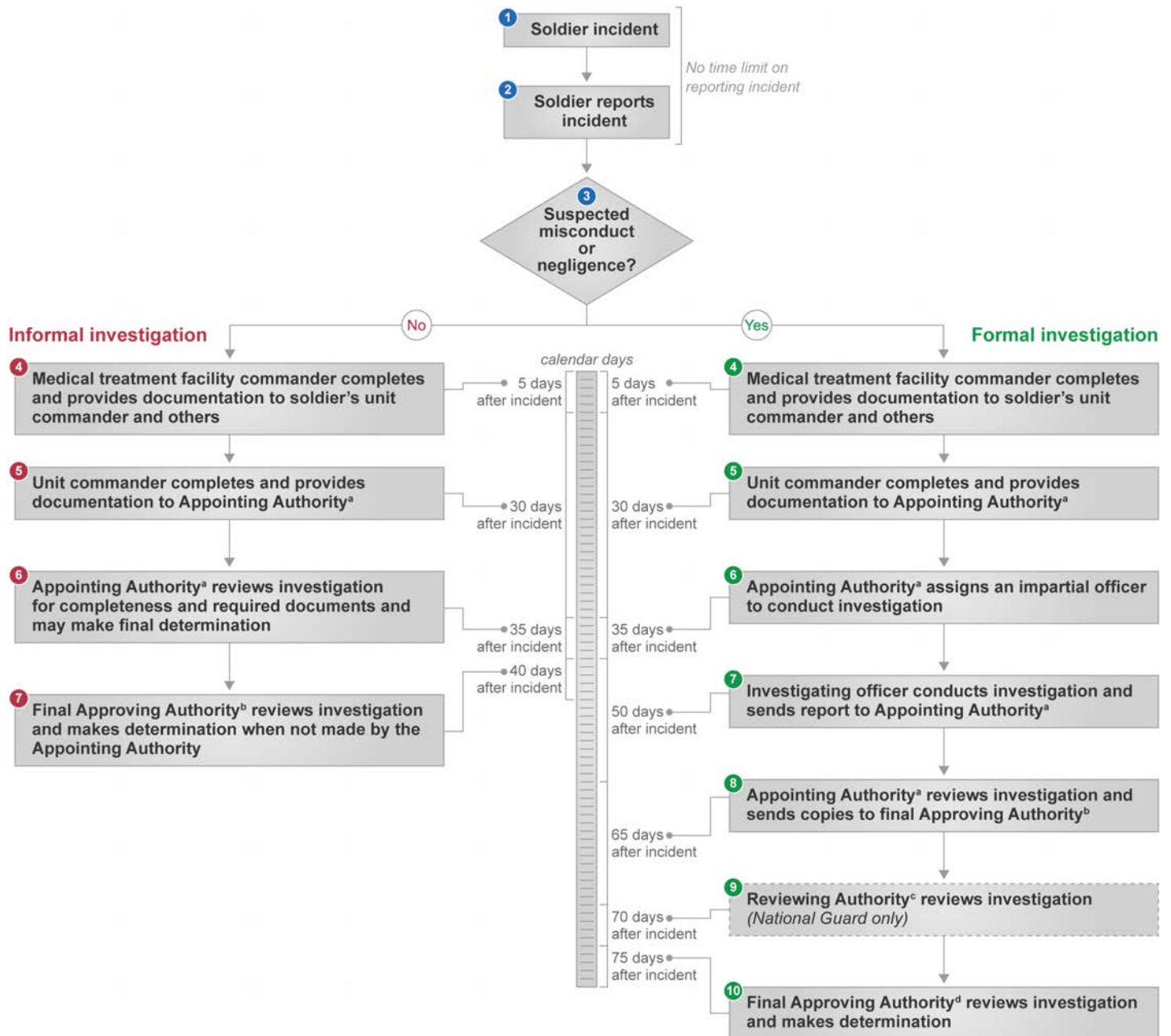
[a]A Line of Duty Appointing Authority is normally the Special Court-Martial Convening Authority for the soldier who is the subject of the Line of Duty investigation. This could be the commanding officer of a brigade, regiment, battalion or corresponding unit of the Army.

In analyzing January 2015 soldier non-availability data, we found that 81 percent—or 1,781 of 2,204 investigations—of Army Reserve Line of Duty investigations underway were overdue. Additionally, as of the same time, 74 percent—or 3,364 of 4,538—Army National Guard Line of Duty investigations underway were overdue. See figure 2 where we break down these percentages in terms of the backlog of formal and informal Line of Duty investigations as of January 2015.

Figure 2: Army Reserve and Army National Guard Backlog of Formal and Informal Line of Duty Investigations as of January 2015
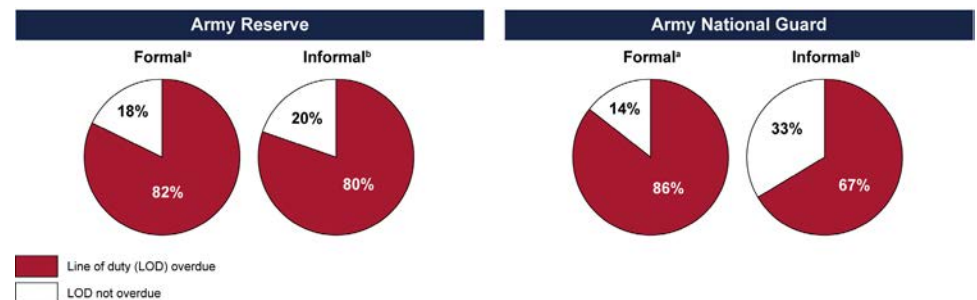
Source: GAO analysis of Army Reserve and Army National Guard data. | GAO-15-626

Note: "Overdue" means the Line of Duty investigation has been in process longer than 40 days for an informal investigation or longer than 75 days for a formal investigation as prescribed by Army Regulation 600-8-4 (i.e., the Army's Line of Duty program regulation).

[a]A "formal" investigation is a case where an independent investigating officer is appointed, involves more steps, and should be completed within 75 days after the soldier reports the incident.

[b]An informal investigation can be conducted through the soldier's chain of command, has fewer steps, and should be completed within 40 days after the soldier reports the incident.

The Army Reserve and the Army National Guard have not developed a plan for addressing the backlog of Line of Duty investigations. While time standards exist for the completion of Line of Duty investigations as well as for each of the other steps that soldiers pass through in the Integrated Disability Evaluation System, Army Reserve and Army National Guard officials we interviewed stated that they did not know of a plan specifically

established to address the Line of Duty investigation backlog. While there is no specific plan for addressing the backlog, the Army National Guard sends a weekly report to each of the states and territories to inform them of their delinquent investigation status rate. We have reported previously on the importance of developing detailed implementation plans for achieving agency goals, to include milestones to guide agencies' actions.[27] More specifically, developing and using specific milestones and timelines to guide and gauge progress toward achieving an agency's desired results informs management of the rate of progress in achieving the goals or whether adjustments need to be made in order to maintain progress within given timeframes. Without an effective and efficient process to reduce the current backlog of Line of Duty investigations, Army Reserve and Army National Guard soldiers will continue to await decisions and be non-available during the process for an extended period of time.

Many Causes Exist for Line of Duty Investigation Delays, and the Army Is Reviewing the Line of Duty Program Regulation

Army guidance indicates that a soldier's primary responsibility is to attend medical and administrative appointments and to assist in providing required personnel and administrative data, and maintain regular, open communication in order to meet all requirements.[28] However, unit officials we interviewed said that soldiers can be noncompliant with meeting the processes' requirements. They stated that many soldiers do not actively participate in their medical appointments or provide necessary supporting documents. Sometimes, soldiers are unwilling to reveal all of their medical conditions or provide permission for release of their medical records from their private providers, where applicable, which slows the process.

Another cause we identified for the delay in completing Line of Duty investigations is the absence of a time limit for reporting incidents. Army Reserve and Army National Guard unit officials we interviewed said that having to investigate soldiers' claims of injuries or illnesses from many years past was burdensome as the Line of Duty program regulation sets

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[27] GAO, *Business Process Reengineering Assessment Guide*, GAO/AIMD-10.1.15 (May 1997) and GAO, *Defense Health Care Reform: Additional Implementation Details Would Increase Transparency of DOD's Plans and Enhance Accountability*, GAO-14-49 (Washington, D.C.: Nov. 6, 2013).

[28] U.S. Army Medical Command, *IDES Guidebook: An Overview of the Integrated Disability Evaluation System*, October. 2012.

no statute of limitations on reporting their incidents to their unit. One National Guard unit official said that processing a claim that a soldier was injured 5 or 10 years prior takes an extensive amount of time and resources. Additionally, several Army Reserve and National Guard officials stated that the time standards within which the Line of Duty investigations are to be completed are unreasonable for the reserve components.

Army Reserve and Army National Guard officials stated that there are training opportunities on Line of Duty investigations given along with other aspects of the disability evaluation system. For example, National Guard Bureau officials told us that they conduct Line of Duty training on a quarterly basis at the Professional Education Center, located in North Little Rock, Arkansas, and the class is open to all commanders, case managers, medical readiness unit officials, and health services specialists. However, officials from at least one National Guard state indicated that more unit leader training on Line of Duty responsibilities would be welcome as, according to these officials, the only Line of Duty investigation training that they knew of was for company commanders and it consisted of a 30-minute block of training given during their company pre- command course. They said additional training would be helpful because a high percentage of the Line of Duty investigations are returned to the units for corrections. These same National Guard officials said that even if the pre-command course included more training, funding levels in their state has precluded them from holding any pre-command courses in 2015. They added that they could not send one-fourth of their state's company commanders to any of the three courses that were held in 2014 due to a shortage of funding.

According to officials in the Office of the Army Surgeon General, Headquarters-Department of the Army, and the Army Human Resources Command, a working group with officials from these offices as well as from the Department of the Army G-1 (personnel); the Office of the Chief, Army Reserve; and the Office of the Chief of the National Guard Bureau convened in 2010 to update the Line of Duty investigation policies, procedures, and requirements to improve the program regulation and address several of the causes of the delays. We obtained and reviewed the draft program regulation and found that it contained proposed changes that would address several of the challenges contributing to the delays of processing Line of Duty investigations. For example, the draft program regulation established a time restriction for initiating a Line of Duty investigation and extended the time standards to complete and process the investigations. However, in our review of the draft program

regulation, we did not find evidence of any specific actions aimed at addressing soldier non-compliance, which officials told us was a large contributor to the delays in completing the investigations. While this working group was formed 5 years ago and produced a draft regulation, as of June 2015, officials stated that the final revised regulation governing this program has yet to be issued, and they were unaware of what may be delaying its release or when that release might be. According to the Internal Control Management and Evaluation Tool[29] which is accompanies GAO's Standards for Internal Control in the Federal Government,[30] to help ensure effective and efficient program results, policies and procedures should be regularly evaluated to ensure that they are still appropriate and working as intended. Without updated program guidance, the Army's reserve components may continue to experience delays in the processing of Line of Duty investigations and injured and ill soldiers may be held in an extended non-available status to their units as a result.

The Army Reserve Components Account for Their Soldiers Who Have Not Completed their Initial Military Training and Are Considered Non-Available within Their Home Units

The Army reserve components account for their soldiers who have not completed initial military training—this includes basic training and qualifications for a specific job—directly within their home units instead of through a separate account as the Active Army does. As of January 2015, the Army Reserve reported that about one-third of its non-available soldiers and the Army National Guard reported approximately half of its non-available soldiers were categorized as non-available because they had not completed their initial military training. According to Army reserve component unit officials, certain situations can delay new soldiers from completing their training and make them non-available for extended periods of time. For example:

- Enlistees under the Split Training Option are enlisted soldiers who complete basic training, return to their civilian education or occupation, and then receive their job-specific or advanced training the next year. However, Army Reserve and Army National Guard information indicates that Split Training Option soldiers represent a

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[29] GAO, *Internal Control Management and Evaluation Tool*, GAO-01-1008G (Washington, D.C.: Aug. 2001).

[30] GAO/AIMD-00-21.3.1.

small non-available population of less than 1.5 percent of their total number of soldiers.

- Soldiers who are injured or become ill during initial military training may have to withdraw from the training, take time to heal, and start over again, prolonging their overall time in a non-available status.
- Changes in the level of funding for training can lead to the cancellation of classes and delay the start or completion of a soldier's required training.
- Soldiers who do not meet height and weight or physical fitness standards cannot attend initial military training until the standards are met.
- Soldiers who cannot complete the required initial military training must be processed for discharge, and the discharge process can be delayed because of notification requirements. As such, the affected soldier remains non-available during this time.

The Army National Guard Combat Readiness Reform Act of 1992 as amended requires that initial military training be completed within 2 years from an individual's start date. [31] Additionally, Army Regulation 220-1 specifies a training qualification rate between 85 and 100 percent for optimum unit readiness. The Army National Guard also establishes a training qualification rate of 85 percent in its 2014 – 2020 Strategic Planning Guidance document. As of January 2015, both the Army Reserve commands and the Army National Guard states we reviewed were meeting their identified training goal of 85 percent.[32]

According to the Army National Guard Combat Readiness Reform Act of 1992, as amended, the Secretary of the Army has the legal authority to establish a personnel accounting category to be used for reserve component soldiers who have not completed their initial military training or who are otherwise not available. This account provides units with improved unit availability rates by assigning soldiers who are non-available due to training or other issues to a separate personnel account that is external from the unit's personnel roster. However, Army Reserve and Army National Guard officials stated that, unlike the Active Army,

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[31] Army National Guard Combat Readiness Reform Act of 1992, as amended. See 10 U.S.C. § 10105 note.

[32] We are expected to release a report by the end of fiscal year 2015 on the results of our review of Army National Guard recruiting regulations, policies, and procedures to include an assessment specifically related to soldiers' completion of initial training.

they do not use a separate personnel account to assign soldiers who are in training, in transit, or incapacitated for a long period of time—referred to as a Trainees, Transients, Holdovers, and Students account. The Army reserve component soldiers in these situations who are non-available are directly assigned to their units and are counted against their home units' manning and personnel readiness levels, and therefore, their unit non-availability rates are typically higher than those of the Active Army. For example, a senior official said that the Army National Guard units usually have approximately 20 percent of their unit non-available because of having not completed initial military training or because of other issues that make them non-available.

The Army Reserve and the Army National Guard officials stated that they have not established a personnel account for reserve component soldiers who have not completed their initial military training or who are otherwise not available for several reasons. For example, Army Reserve officials stated that during a 2012 pilot of administratively assigning soldiers who had not completed training or other non-available soldiers to a separate personnel account, they found that the unit commanders felt that they had lost some level of accountability for their soldiers once they were being managed by others outside of the unit. Further, officials stated that costs were incurred to hire additional personnel to support the management of individuals assigned to a Trainees, Transients, Holdovers, and Students account outside of their home unit. National Guard and unit officials we interviewed agreed that implementing a separate account to manage these soldiers outside of their home unit is currently cost prohibitive.

Army reserve component officials stated that there will always be a portion of the force in the training pipeline and, therefore, non-available as long as new soldiers are recruited. Not separately accounting for these new soldiers negatively affects the overall availability rate of the unit to which they are assigned. Alternatively, utilizing a separate account to manage soldiers allows the Active Army to fill its units with only those who have completed initial military training and who are considered available from a training perspective. Regardless of whether the Army reserve components use a separate personnel account or accounting for non-available soldiers within the units, soldier availability rates of the force as a whole do not change, as those non-available soldiers would still exist within the reserve components and would have to be accounted for and managed.

Conclusions

The Army Reserve and the Army National Guard categorized about a quarter of their soldiers as not available for mobilization due to various reasons such as duty-limiting medical conditions, lack of initial training, or other administrative situations that exist. While the Army reserve components collect a large amount of data regarding soldier medical, training, and other statuses to report non-availability rates, the completeness, accuracy, and timeliness of these data are not sufficiently reliable for supporting their reported soldier non-availability rates.

Specifically, the Army Reserve and the Army National Guard currently do not frequently conduct data quality reviews that identify the full range of potential errors, missing or invalid values, and inconsistent data among all the data systems used to track soldier availability, which cause soldiers to be listed as available despite having statuses in contradiction with the guidance concerning availability. In addition, the multiple data systems used to track availability data do not currently interface in a way to allow for timely updates between all systems to ensure the relevance and value of the data management uses to make soldier availability-related decisions. These data problems hinder Army leaders' ability to know the true extent to which their reserve component soldiers are available and ready for duty at a given point in time. Without quality data that is readily available to leaders at all levels from systems that interface in a way that produces the most up-to-date information possible, the Army and its reserve component leaders will not be able to adequately monitor and manage the availability of soldiers who make up over half of the total Army force.

Moreover, the majority of Line of Duty investigations to verify such circumstances as solider injury and illness are overdue. Thus, many of these soldiers are being maintained in a non-available status for extended periods of time while awaiting the completion of these investigations. A planned revised program regulation for Line of Duty investigations could address some of the delays, but its issuance has been pending for years and does not appear to address all causes of the delays, such as soldiers not providing information as required. Within units, the overall non-available percentage is not just an aggregate number but represents individual soldiers with particular skills who are needed to perform specific roles and tasks for the unit. As the Army and its reserve components reduce their overall number of soldiers in the near future, each soldier that remains plays a larger part in contributing to the missions of their units. Consequently, it becomes critically important for commanders to effectively manage their non-available soldiers so as to minimize the impact to their unit's readiness as well as that of the total Army force.

Recommendations for Executive Action

We recommend that the Secretary of Defense direct the Secretary of the Army to take the following four actions:

- Improve the Army Reserve's and the Army National Guard's internal control procedures to ensure that individual soldier availability information in each data system is complete, accurate, and timely by increasing the scope and frequency of data quality reviews at the unit and national levels to address issues resulting from self-reporting and inaccurate inputs;
- Develop and implement ways that the Army reserve components can facilitate timely updates of availability data between all data systems through the current system interfaces to improve the relevance and value of the data that management is using to make soldier availability-related decisions;
- Develop a plan with timelines and take actions accordingly to address the backlog of Line of Duty investigations; and
- Revise the Line of Duty program regulation to include procedures that would address implementation challenges that contribute to delays in the processing of Army Reserve and Army National Guard soldiers' claims of incurring service-connected injuries and illnesses, such as by including the identification of and procedures to address non-compliance by soldiers, and take steps to expeditiously issue that revised program regulation.

Agency Comments and Our Evaluation

In DOD's written comments on a draft of this report, DOD concurred with comments on each of our four recommendations. DOD's comments are included in appendix II.

DOD concurred with comment on our first and second recommendations to (1) improve internal control procedures to help ensure that individual soldier availability information in each data system is complete, accurate, and timely and (2) to develop and implement ways to facilitate timely updates of availability data between all systems that management uses to make soldier availability-related decisions. In its comments, the Army National Guard stated that, while it concurred with the recommendations, it believes our report did not analyze the lack of training for personnel clerks within the states. Additionally, it stated that system limitations as well as staffing shortages and budget constraints contribute to the delays in updating information within its primary system, SIDPERS. Further, the Army National Guard believes that the deployment of the Integrated Personnel and Pay System-Army will resolve the identified issues, and training will play a vital role in the implementation of that system. In the report we state several reasons why the soldier non-availability

information is not complete, accurate or timely. The lack of training for personnel clerks, staffing shortages, and budget constraints may certainly be additional causes for the data problems identified. We encourage the Army National Guard to take all necessary actions to remedy these problems they have identified. However, we continue to believe that the completeness, accuracy, and timeliness of solider availability-related data will be improved by taking actions to strengthen the internal control procedures and developing and implementing ways to facilitate timely updates of availability data between all systems.

In their comments related to the reliability of its soldier availability-related data, the Army Reserve stated that the report contains an inaccuracy regarding the Data Quality Index and its intended use and capability. More specifically, the Army Reserve contends that the Data Quality Index is an "on-demand" report that can identify blank, invalid, and pay-related data discrepancies, and are available to unit commanders to run as needed and to monitor the data quality of their assigned unit. In our report, we state that unit administrators can create "on-demand" discrepancy reports to help address data, but the administrators have to suspect a potential problem with the data before they run the corresponding, issue-specific "on-demand" reports to identify and help resolve any problems. We also state that unit officials are running their unit level data quality reviews, intermittently and that these unit reviews do not check the full range of potential errors, missing or invalid values, and inconsistent data among all the data systems used to track soldier availability. Since the Army Reserve and the Army National Guard use more than a dozen data systems to record or analyze various pieces of data related to the medical, training, and administrative status of their soldiers, we continue to believe that these reserve components need to take appropriate steps to improve the reliability of their soldier availability information.

DOD concurred with comment on our third and fourth recommendations related to improving the completion of Line of Duty investigations. Specifically, the Army Reserve states that we did not fully analyze the manpower necessary for completing the Line of Duty investigations. Further, it stated that we did not mention that major contributing factors to the increase in the number of investigations are soldiers with pre-existing medical conditions who are transitioning from the active duty to the reserve components as well as the Department of Veterans Affairs' requirement for a completed Line of Duty investigation for every claimed condition. Our report states that many causes exist for the delays in completing Line of Duty investigations, and we provide examples of
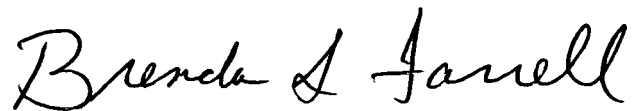
common causes that we heard during our review. However, we recognize that these are not the only causes for delays in completing Line of Duty investigations. It may be very likely that the manpower demands, soldier transition issues and the Department of Veterans Affairs' requirement mentioned by the Army Reserve could be additional causes for the delays. No matter the cause for the delays, the significant backlog of incomplete Line of Duty investigations shows that this has been a long-standing issue within the reserve components. Therefore, it is imperative that they resolve this problem as it is in the best interest of the soldiers to expeditiously address their medical situations in order to minimize the number of non-available soldiers being retained within Army reserve component units.

Further, the Army Reserve stated in its comments that it is developing a plan of action to address the critical findings related to Line of Duty investigations and that two agencies are currently testing a streamlined Line of Duty process. Upon review of quantitative data from the test, the Army Reserve states that it will develop a comprehensive plan of action to address its backlog of late Line of Duty investigations. According to the Army Reserve, the plan of action will streamline and standardize internal processes in order to reduce the backlog and adjudicate cases more efficiently. Finally, it plans to review the feasibility of creating a Process Act Team to both address the existing backlog and develop a more active method of processing new Line of Duty investigations. We are encouraged by the Army Reserve plans to take actions to address this important issue which can hold injured and ill soldiers in a non-available status for extended periods of time.

The Army Reserve also stated that our report did not mention that it had established a separate personnel account known as a Trainees, Transients, Holdovers, and Students account back in the mid to late 2000, but it was later dissolved. The Army Reserve stated that the account was dissolved due to lack of commander's accountability and ownership of their soldiers when they were assigned and managed outside of their home unit, and because of the resources (people, systems, etc) involved in managing the account. However, our draft report did note the 2012 pilot of administratively assigning soldiers who had not completed training or other non-available soldiers to a separate personnel account. Moreover, our report provides a description of how the Army Reserve components' accounting of soldiers who have not completed initial military training—that is, directly within their home units—differs from the active Army's practice of using a separate account. We did not evaluate the advantages or disadvantages of either accounting practice.

We are sending copies of this report to the appropriate congressional committees; the Secretary of the Army; the Chief, Army Reserve Command; the Director, National Guard Bureau; the Director, Defense Health Agency, and the Surgeon General of the Army. In addition, the report is available at no charge on GAO's website at http://www.gao.gov.

If you or your staff have any questions about this report, please contact me at (202) 512-3604 or farrellb@gao.gov. Contact points for our Offices of Congressional Relations and Public Affairs may be found on the last page of this report. GAO staff who made major contributions to this report are included in appendix III.

Brenda S. Farrell
Director
Defense Capabilities and Management

Appendix I: Scope and Methodology

The objectives of our review were to (1) examine the extent to which the Army reserve components have complete, accurate, and timely information to report soldiers' non-availability rates and (2) examine the extent to which the Army reserve components verify in a timely manner whether soldiers' injuries and illnesses are service-connected, as delays can affect soldier non-availability and (3) provide a description of how the Army reserve components account for new soldiers who are not available because they have not completed initial military training.

For our first objective, we obtained solider identification information and medical-, training-, and administrative-related data for the Army Reserve and the Army National Guard for fiscal years 2010 through 2014. In table 3, we list examples of the categories of unit-level availability-related data categories provided to us by the U.S. Army Reserve Command and the National Guard Bureau for fiscal years 2010 through 2014, from the five data systems we discuss in this report.

Table 3: Examples of Unit-Level Availability Data Categories Provided by the Army Reserve Components for Fiscal Years 2010 through 2014

Availability data categories	
State	Medically Ready and Available
Unit ID	Fully Medically Ready
Number of Assigned Soldiers	Medically indeterminate
Number of Available Soldiers	Non-Available, Currently Deployed
Number of Non-Available Soldiers	Deployable and Medically indeterminate
Number of Deployable Soldiers	Trained Strength and Medically indeterminate
Number of Non-Deployable Soldiers	Trained Strength and Medically Ready
Non-Deployable Due to Medical Reasons	Deployable and Medically Ready
Non-Deployable Due to Other Reasons	Medically Non-Deployable in Excess of 12 Months
Other Non-Available Soldiers	Medically Not Ready in Excess of 6 Months
Medically Not Ready Soldiers	Other Operationally Non-Available
Medically Ready Soldiers	Operationally Available
Long-Term Medically Not Ready	Operationally Non-Available
Short-Term Medically Not Ready	Operationally Available but Never Deployed
Soldiers in Training Pipeline	Medically Not Ready and Operationally Non-Available
Available but Never Deployed	Medically Ready and Operationally Available
Medically Not Ready and Non-Available	Commander's Exempted Strength

Source: Army Reserve and Army National Guard | GAO-15-626

For the availability data we received, we identified inconsistencies in the way the medical availability data were reported around the June to July 2012 timeframe. Through discussions with Army Reserve and Army National Guard officials, we determined that in 2012 there was a change in how soldiers with certain medically limiting conditions were being accounted for.[1] As a result, we analyzed the data from the time period after the policy change, July 2012 through the end of calendar year 2014, in order to have consistent data over the entire timeframe for our review. We also decided to use a non-generalizable sample of a combination of six units—two Army Reserve commands and four Army National Guard states— for a detailed analysis of the individual soldier non-availability data.

In order to select a non-generalizable sample of commands to review, we initially obtained summary data for each of the 54 Army National Guard states and territories of the United States as of September 2014. This summary availability data included the number of Army National Guard soldiers:

- assigned to each state or territory,
- reported as non-available,
- reported as non-available due to medical reasons and reported as a percentage of the total number of soldiers reported as non-available, and
- reported as non-available due to training reasons and as a percentage of the total number of soldiers reported as non-available

In table 4, we list the four Army National Guard states we selected for our non-generalizable sample and the criteria we used for selecting each one—that is, the combination of the number of assigned soldiers in the state or territory, their geographic dispersion across the country, and whether they have high or low rates of overall, medical- or training-related soldier non- availability.

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[1] National Guard Bureau officials informed us that in July 2012 the Army reserve components collectively made a rule change, effectively changing the status of soldiers with short-term medically-limiting conditions from "available" to "non-available" for mobilization.

Table 4: Basis for Selecting the Four Army National Guard States

Army National Guard State	Basis for Selection
California	• large number of assigned National Guard soldiers; • in the western part of the United States; • in the top 10 of states with highest percentage of non-available National Guard soldiers due to medical-related reasons; and • in the lowest 10 of states with the lowest percentage of non-available National Guard soldiers due to training-related reasons.
Georgia	• large number of assigned personnel; • in the southern part of the United States; and • in the lowest 10 according to percent of non-available National Guard soldiers due to medical-related reasons.
Utah	• medium number of assigned National Guard soldiers; • in the mid-western part of the United States; • in the lowest 10 according to percent of non-available National Guard soldiers overall; and • in the lowest 10 according to percent of non-available National Guard soldiers due to medical-related reasons.
Michigan	• medium number of assigned National Guard soldiers; • in the mid-western part of the United States; • the highest percent of non-available National Guard soldiers overall; and • in the highest 10 according to percent of non-available National Guard soldiers due to medical-related reasons.

Source: GAO analysis of National Guard Bureau data | GAO-15-626

In addition to these four Army National Guard states, we also selected two Army Reserve commands, as a part of our non-generalizable sample, on the basis of (1) the number of assigned soldiers and (2) their proximity to and geographic dispersion with the four Army National Guard states in order to allow for regional perspectives between organizations. As such, we selected the largest command—the 377th Theater Sustainment Command in Louisiana—and one medium-sized command—the 807th Medical Support Command in Utah.

Due to the magnitude of discrepancies that we found using the historical data from July 2012 through the end of fiscal year 2014, we decided we could more comprehensively analyze these discrepancies with a snapshot in time of soldier availability data rather than using historical trend data. We decided to use a snapshot of the most current data available (January 2015), from the same six Army Reserve and Army National Guard units rather than using data from all Army Reserve and Army National Guard units. After we decided to focus our review on a

snapshot in time of the soldier non-availability data, we obtained individual soldier availability information as of January 2015 (see table 5) for the selected four Army National Guard states and two Army Reserve commands. We determined that the information we obtained and analyzed, though not representative of all units, was sufficient to provide relevant insights for our review.

Table 5: Examples of Individual Soldier Availability Data Categories Provided by the Army Reserve Components for January 2015

Availability data categories	
Date	Officer Candidate School (Yed/No)
Individual ID	Under 18 Years of Age (Yes/No)
State	Lautenberg Exemption (Yes/No)
Gender	Commander Exempted Strength (Yes/No)
Assigned (Yes/No)	Drill Non-Participant (Yes/No)
Available (Yes/No)	Long-Term Drill Non-Participant (Yes/No)
Medical Readiness Code	Other Non-Available (Yes/No)
Length of Time in Current Medical Status	Number of Deployments
Dental Readiness Code	Training Pipeline (Yes/No)
Physical Functional Capacity	Initial Training Incomplete (Yes/No)
Unadjudicated Medically Limiting Condition (Yes/No)	Split Option Soldier (Yes/No)
Mobilized (Yes/No)	Non-Available in Excess of 12 months (Yes/No)
Deployed (Yes/N0)	Non-Available in Excess of 24 months (Yes/No)

Source: Army Reserve and Army National Guard | GAO-15-626

We spoke to officials from each of these commands and states (excluding Michigan), as well as the US Army Reserve Command and the National Guard Bureau regarding the data we analyzed and the discrepancies we identified to obtain a complete understanding of the availability data and multiple data systems. Officials from Michigan were willing to speak with us, but we were unable to coordinate on a mutually agreeable time.

The Army Reserve and Army National Guard provided us individual soldier availability data from the five main data systems they use to track availability-related data, including the Medical Protection System (MEDPROS), the Army Training Requirements and Resources System (ATRRS), the Total Army Personnel Data Base-Reserve (TAPDB-R), the Standard Installation/Division Personnel System (SIDPERS), and the Reserve Component Manpower System (RCMS). The availability data from these five systems were sufficient to answer the objectives for the purpose of this report for the following reasons. First, the entire Army

uses MEDPROS to track immunization and medical readiness for all active and reserve components as well as other pieces of information affecting soldiers' medical availability to deploy. ATRRS is the Department of the Army's management information system of record for managing soldier training information. TAPDB-R is the Army Reserve's database of record for personnel data to fully support all personnel manning functions during peacetime and deployment. SIDPERS is the database of record for all personnel information for Army National Guard soldiers. Both TAPDB-R and SIDPERS track the administrative causes of non-availability. Lastly, both the Army Reserve and the Army National Guard use RCMS to provide decision makers with standard reports for analyzing personnel and operational readiness data by aggregating sources of information from multiple data systems. The Army reserve components use the information in these multiple data systems collectively to assess a soldier's and a unit's overall availability for mobilization and deployment.

We compared these solider availability data from these five data systems for the six selected locations with (1) *Standards for Internal Control in the Federal Government*[2] and (2) Army guidance documents for reporting the availability of soldiers, and assessed the soldier availability information for completeness, accuracy, and timeliness. Specifically, *Standards for Internal Control in the Federal Government* states that complete and accurate information should be available on a timely basis to maintain its relevance and value to management in making decisions, allow for effective monitoring of events, and effective decision-making to accomplish agency objectives. Furthermore the *Standards for Internal Control in the Federal Government* defines "timeliness" as information that is promptly recorded to maintain its relevance and value to management in making decisions such as reporting soldier non-availability rates. In addition, these standards state that controls should be installed at the interfaces between systems to ensure all inputs received are valid, all outputs are correct and properly distributed, and information is provided in a timely manner to maintain its relevance and value to decision makers. We also used Department of the Army Pamphlet 220-1 to provide us with the instructions and reference information related to (1) determining and reporting personnel data, (2) the mobilization of Army National Guard and Army Reserve units, and (3)

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[2] GAO/AIMD-00-21.3.1.

the duty-limiting conditions which would make a soldier non-available for mobilization. We assessed the reliability of the data elements in the multiple data systems needed for this engagement based on the criteria above and identified the data reliability issues discussed in the body of this report. As previously discussed, the data systems contain inaccurate and incomplete records, soldiers listed as available in contradiction with availability reporting guidance, and availability data that may not be relevant or valuable to management due to current system interfaces that do not allow for timely updates between all systems. Overall, the issues we identified within and between data systems used for tracking individual soldier availability render them not sufficiently reliable for the purpose of reporting soldier availability rates.

For our second objective, we obtained and reviewed the Line of Duty program regulation,[3] which details the policies and procedures for investigating the circumstances of a soldier's disease, injury, or death. The Deputy Chief of Staff of the Army for Personnel (G-1) is the proponent and exception authority that includes the investigation procedures and the processing time standards for these investigations. Further, we obtained summary information from the Army Reserve and the Army National Guard from January 2015 that showed (1) the total number of Line of Duty investigations that were in process at that time for the entire Army Reserve by support command level and Army National Guard by state or territory and (2) the breakdown of the total as to the number that were on-time and overdue as compared with the Line of Duty program regulation's processing time standards. We discussed the Line of Duty investigation process and the challenges that exist with the implementation of this program with officials from the U.S. Army Reserve Command, the National Guard Bureau, the California National Guard, the Georgia National Guard, the Utah National Guard, the 377th Theater Sustainment Command, and the 807th Medical Support Command. Further, we interviewed officials from the Office of the Surgeon General-Army, the U.S. Army Human Resources Command, and the Headquarters, Department of the Army to determine the status of the review of the Line of Duty program along with any updates in process to its governing regulation.

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[3] Department of the Army, Army Regulation 600-8-4, *Line of Duty Policy, Procedures, and Investigations*, (Sep. 4, 2008).

For our third objective, we identified relevant active and reserve component regulations, laws and policies describing the initial military training[4] requirements for new soldiers to be considered available for mobilization and subsequent deployment and the timelines for completing the training. We also analyzed Army Reserve and Army National Guard summary reports as well as data for individual soldiers from the six sites we selected for January 2015 showing the number of soldiers that were not available because they had not completed their initial military training. To identify the extent to which delays exist in the process of soldiers completing their initial military training, we also requested information from U.S. Army Recruiting Command, the U.S. Army Reserve Command, and the National Guard Bureau for January 2015 showing the number of soldiers who were delayed in completing their initial military training.

Additionally, to determine how the Active Army, the Army Reserve and the Army National Guard account for their soldiers who are in training or otherwise in a non-available status, we researched applicable laws governing the assignment of soldiers to units or to a separate personnel account. We interviewed U.S. Army Reserve Command, Army National Guard, and unit officials to discuss the advantages and disadvantages of using the different assignment approaches. In order to better understand how initial military training policies and procedures were being applied to individuals processing through the training, we interviewed officials from U.S. Army Recruiting Command, the National Guard Bureau, the U.S. Army Reserve Command, and the U.S. Army Training and Doctrine Command. We also interviewed both Army Reserve and Army National Guard command and unit leaders at our selected locations to identify the management challenges, as well as, the effect that soldiers who were not available because they had not completed initial military training had on those locations.

To further our understanding of issues regarding the availability of Army Reserve and Army National Guard soldiers across each of these three objectives, we interviewed officials, or where appropriate, obtained documentation from the organizations listed below:

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[4] Initial military training refers to basic officer leadership course, warrant officer basic course, as well as basic combat training and advanced individual training for enlisted soldiers to qualify for a military occupational specialty.

- Office of the Assistant Secretary of Defense for Reserve Affairs
- Office of the Assistant Secretary of the Army for Manpower and Reserve Affairs
- Headquarters, Department of the Army
- Office of the Surgeon General, Army
- U.S. Army Human Resources Command
- Defense Health Agency
- National Guard Bureau
- U.S. Army Reserve Command
- Army Reserve Medical Management Center
- California National Guard
- Georgia National Guard
- Michigan National Guard
- Utah National Guard
- 377th Theater Sustainment Command
- 807th Medical Support Command

We conducted this performance audit from July 2014 to July 2015 in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Appendix II: Comments from the Department of Defense

OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
1500 DEFENSE PENTAGON
WASHINGTON, DC 20301-1500

MANPOWER AND
RESERVE AFFAIRS

Ms. Brenda S. Farrell
Director, Defense Capabilities and Management
U.S. Government Accountability Office
441 G Street, NW
Washington DC 20548

Dear Ms. Farrell:

This is the Department of Defense (DoD) response to the GAO Draft Report
GAO-15-626, "ARMY RESERVE COMPONENTS: Improvements Needed to Data Quality and
Management Procedures to Better Report Soldier Availability, "dated June 29, 2015 (GAO Code
351958).

Of the four recommendations made in the report the Department concurs with comment
on all four. Please find included those comments for inclusion in the report.

Sincerely,

Richard O. Wightman, Jr
Principal Deputy Assistant Secretary of Defense
(Reserve Affairs)

Attachments:
As Stated

GAO DRAFT REPORT DATED JUNE 29, 2015
GAO-15-626 (GAO CODE 351958)

"ARMY RESERVE COMPONENTS: IMPROVEMENTS NEEDED TO DATA
QUALITY AND MANAGEMENT PROCEDURES TO BETTER REPORT SOLDIER
AVAILABILITY"

DEPARTMENT OF DEFENSE COMMENTS
TO THE GAO RECOMMENDATION

RECOMMENDATION 1: The GAO recommends that the Secretary of Defense direct the
Secretary of the Army to improve the Army Reserve's and the Army National Guard's internal
control procedures to ensure that individual soldier availability information in each data system is
complete, accurate, and timely by increasing the scope and frequency of data quality reviews at
the unit and national levels to address issues resulting from self-reporting and inaccurate inputs.

DoD RESPONSE: Concur with comment.

RECOMMENDATION 2: The GAO recommends that the Secretary of Defense direct the
Secretary of the Army to develop and implement ways that the Army reserve components can
facilitate timely updates of availability data between all data systems through the current system
interfaces to improve the relevance and value of the data management is using to make soldier
availability-related decisions.

DoD RESPONSE: Concur with comment.

RECOMMENDATION 3: The GAO recommends that the Secretary of Defense direct the
Secretary of the Army to develop a plan with timelines and take actions accordingly to address
the backlog of Line of Duty investigations..

DoD RESPONSE: Concur with comment.

RECOMMENDATION 4: The GAO recommends that the Secretary of Defense direct the
Secretary of the Army to revise Line of Duty program regulation to include procedures that
would address implementation challenges that contribute to delays in the processing of Army
Reserve and Army National Guard soldier's claims of incurring service-connected injuries or
illnesses, such as the identification of and procedures of and procedures to address
noncompliance by soldiers, and take steps to expeditiously issue it.

DoD RESPONSE: Concur with comment.

Comments

ARNG:

Coordinator Comment: Concur with the four recommendations for executive action, but this report falls short on analyzing the lack of training for Personnel clerks within the State. The 42 Series MOS are responsible for data entry via SIDPERS/RCAS, which interfaces with other external Army and DoD systems.

Coordinator Justification: Another issue for the Guard is the limitations of its primary core system, SIDPERS, and the time it takes for significant changes to be made due to staffing shortages and budget.

Originator Justification for Resolution: We expect the deployment of IPPS-A to resolve the identified issues/conflicts within the ARNG HR Systems. Training will play a vital role in the implementation of IPPS-A.

USAR:

Page 13 paragraph 2 of the GAO-15-626 report contains inaccuracy in content in regards to Data Quality Index (DQI) and its intended use and capability. The DQI is not a quarterly report, this report can be ran on demand. The DQI was created to rank each Command while focusing on the correction of the "most" pertinent data fields. When initially deployed the DQI addressed over 100 data fields but has since been adjusted down to the "top ten" data quality issues. The three measured indexes are Blank Data Quality, Invalid Data Quality and Pay/Per Discrepancy. All three of these indexes can be modified to measure any number of data quality focal points.

The "Blanks and Invalids Report" is the comprehensive "Unit" level report designed to measure 181 Blank and Invalid fields to include discrepancy data. All five of these reports can be ran "on demand" and provide Commanders the ability to monitor the data quality of their assigned unit's.

The Army Reserve is developing a plan of action to address the critical findings related to Line of Duty investigations. This plan of action will streamline and standardize our internal processes in order to reduce the backlog and process new cases more efficiently, while aligning with the revisions to AR 600-8-4.

Page 23, second paragraph states that the Army Reserve stated that they have not established a personnel account for RC Soldiers who have not completed their IMT or who are otherwise not available for several reasons. It fails to mention, that the Army Reserve established a TTHS account back in the mid to late 2000 and it was later dissolved for several reasons some of which were mentioned in that same paragraph. One, lack of commander's accountability and ownership of the Soldiers assigned to the account. Two, the resources (people, systems, etc) involved in managing the account.

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With regards to bullets 3 and 4 of the recommendations, we concur with the following comments:

This report falls short on analyzing the manpower necessary for completing the LOD investigation either electronically or via hard copy. The report fails to address major contributing factors to the volume and increase in LOD investigations: Active Component to Reserve Component transitions, and the VA requirement for a completed LOD investigation for every claimed condition, resulting in an increased workload for both Informal and Formal investigations at every level of command.

Two agencies are currently testing streamlined LOD processes. Upon review of quantitative data, we will develop a comprehensive plan of action to address the backlog of late LOD investigations throughout the USAR. This plan of action will streamline and standardize internal processes in order to reduce the backlog and adjudicate cases more efficiently.

The USAR will review the feasibility of creating a Process Act Team (PAT) to both address the existing backlog and develop a more active method of processing new LODs.

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Appendix III: GAO Contact and Staff Acknowledgments

GAO Contact

Brenda S. Farrell, (202) 515-3604 or farrellb@gao.gov

Staff Acknowledgments

In addition to the contact named above, Lori Atkinson (Assistant Director), Rebecca Beale, Caitlin Dardenne, Mae Jones, Amie Steele-Lesser, Terry Richardson, Jerry Sandau, Paul Seely, and Sabrina Streagle made significant contributions to this report.